

<b>DEPARTMENT OF TRANSPORTATION U.S. COAST GUARD CG-719B (Rev. 10/96)</b>	<b>APPLICATION FOR LICENSE AS OFFICER, STAFF OFFICER, OPERATOR, AND MERCHANT MARINER'S DOCUMENT</b>	<b>1. PORT (REC)</b>
The Coast Guard estimates that the average burden for this report form is 5 minutes. You may submit any comments concerning the accuracy of this burden estimate or any suggestion for reducing this burden to: Director, National Maritime Center (NMC4A), U.S. Coast Guard, 4200 Wilson Blvd., Suite 510, Arlington, VA 22203-1804 or Office of Management and Budget, Paperwork Reduction Project (2115-0514), Washington, D.C. 20503.		
<b>SECTION I. MARINER'S CREDENTIALS APPLICATION</b>		
<b>2. NAME</b> (LAST) (FIRST) (MIDDLE)		
<b>3. ADDRESS</b>	<b>4. DATE</b>	<b>5. SSN</b>
	<b>6. DATE OF BIRTH</b>	
	<b>7. PLACE OF BIRTH</b>	
<b>8. CITIZENSHIP</b>		<b>9. TELEPHONE NUMBER</b>
<b>10. TYPE OF TRANSACTION (CHECK APPROPRIATE BOXES)</b>  <div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <input type="checkbox"/> LICENSE  <input type="checkbox"/> MERCHANT MARINER DOCUMENT  <input type="checkbox"/> CONTINUOUS DISCHARGE BOOK  <input type="checkbox"/> DISCHARGES         </div> <div style="width: 60%; text-align: center;">           ORIGINAL RENEWAL DUPLICATE ENDORSEMENT SUPPLEMENTAL REPLACEMENT EXCHANGE  <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/> </div> <div style="text-align: center;"> <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/> </div> <div style="text-align: center;"> <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/> </div> <div style="text-align: center;"> <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/> </div> <div style="text-align: center;"> <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/> </div> <div style="text-align: center;"> <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/> </div> <div style="text-align: center;"> <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/> </div> </div> </div> </div>		<b>10a. MMD NUMBER</b>  (CG USE ONLY)
		<b>10b. BK NUMBER</b>  (CG USE ONLY)
<b>11. APPLYING FOR</b>		
<b>12. HAIR</b>	<b>13. EYES</b>	<b>14. WEIGHT</b>
		<b>15. HEIGHT</b>
<b>16. COMPLEXION</b>		
<b>17. NAME AND ADDRESS OF NEXT OF KIN</b>		<b>18. RELATIONSHIP</b>
		<b>19. PARENTAL CONSENT FOR MMD (UNDER 18)</b> <input type="checkbox"/> YES (ATTACHED) <input type="checkbox"/> NO
<b>SECTION II. PRESENT OR PREVIOUS MMD/LICENSE HISTORY</b>		
<b>20. DESCRIPTION OF LICENSE OR MMD</b>	<b>21. PLACE OF ISSUE</b>	<b>22. DATE</b>
		<b>23. LICENSE SERIAL NO. / MMD NO.</b>
<b>24. YES NO</b> INDICATE YOUR ANSWER BY PLACING YOUR INITIALS IN PROPER COLUMN. <input type="checkbox"/> <input type="checkbox"/> HAS ANY COAST GUARD DOCUMENT OR LICENSE HELD BY YOU EVER BEEN REVOKED, SUSPENDED, OR VOLUNTARY SURRENDERED? (If yes, attach statement)		
<b>25. RECORD OF QUALIFYING SERVICE / TRAINING (IF APPLICABLE, CHECK APPROPRIATE BOXES)</b>  <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> MERCHANT MARINE SEA SERVICE DISCHARGE(S)  <input type="checkbox"/> LETTER(S) OF SEA SERVICE ATTACHED         </div> <div style="width: 45%;"> <input type="checkbox"/> MILITARY SEA SERVICE - TRANSCRIPT OR HISTORY OF ASSIGNMENTS  <input type="checkbox"/> COMPLETION OF CG APPROVED SCHOOL / COURSE CERTIFICATE(S) ATTACHED         </div> </div>		
<b>SECTION III. U.S. CITIZENSHIP AND MILITARY RECORD (FOR ORIGINAL LICENSE, AND U.S. MMD ONLY)</b>		
<b>26. PROOF OF U.S. CITIZENSHIP SUBMITTED (CG USE ONLY)</b>		
<b>27. INDICATE STATE IF NATURALIZED BY COURT</b>		<b>28. DATE NATURALIZED</b>
<b>29. HAVE YOU EVER SERVED IN THE U.S. ARMED FORCES?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		<b>30. DATE ENTERED</b>
<b>31. DATE SEPARATED</b>		
<b>32. SERVICE NUMBER</b>	<b>33. FULL NAME (IF DIFFERENT FROM BLOCK 2)</b>	<b>34. BRANCH OF SERVICE</b>
		<b>35. TYPE OF DISCHARGE</b>
<b>SECTION IV. CHARACTER REFERENCES (FOR ORIGINAL LICENSES ONLY)</b>		
<b>36. THREE NOTARIZED LETTERS OF REFERENCE / RECOMMENDATION THAT INCLUDE THE ORIGINATOR'S NAME, ADDRESS, TELEPHONE NUMBER, AND OCCUPATION ARE ATTACHED.</b> <input type="checkbox"/> YES (ATTACHED) <input type="checkbox"/> NO		
<b>SECTION V. REQUEST FOR DUPLICATE LICENSE, MMD, OR CD (LIST INFORMATION ON LOST LICENSE/MMD)</b>		
<b>37. LICENSE SERIAL NUMBER</b>	<b>38. DATE AND PLACE LICENSE ISSUED</b>	
<b>39. MMD NUMBER</b>	<b>40. DATE AND PLACE MMD ISSUED</b>	
<b>41. <input type="checkbox"/> CERTIFICATES OF DISCHARGE (IF REQUEST IS FOR ALL DISCHARGES, SPECIFY OR ATTACH LIST OF VESSELS AND DATES OF SERVICE)</b>		
<b>42. SIGNED STATEMENT ATTACHED EXPLAINING THE PARTICULARS OF HOW, WHEN, AND WHERE THE CREDENTIALS WERE LOST / STOLEN AND APPLICANT'S EFFORT TO RECOVER THEM.</b> <input type="checkbox"/> YES (ATTACHED) <input type="checkbox"/> NO		

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<b>SECTION VI. NARCOTICS, DWI / DUI, AND CONVICTION RECORD</b>			
YES (INITIALS)	NO (INITIALS)	INDICATE ANSWER BY PLACING INITIALS IN PROPER COLUMN	
		Have you ever been convicted of violating a dangerous drug law of the United States, District of Columbia, or any other state or territory of the United States (including marijuana)? <i>(If yes, attach statement).</i>	
		Have you ever been a user of / or addicted to a dangerous drug? (including marijuana) <i>(If yes, attach statement)</i>	
		Have you ever been convicted by any court - including military court - for an offense other than a minor traffic violation? (Conviction means found guilty by judgement or by plea and includes cases of deferred adjudication (nolo contendere adjudication withhold, etc.) or where the court required you to attend classes, make contribution of time or money, receive treatment, submit to any manner of probation or supervision, or forgo appeal of a trial court finding. Expunged convictions must be reported unless the expungement was based upon a showing that the court's earlier conviction was in error.) <i>(if yes, attach statement)</i>	
		Have you ever been convicted of a traffic violation arising in connection with a fatal traffic accident, reckless driving or racing on the highway or operating a motor vehicle while under the influence of, or impaired by, alcohol or a controlled substance. <i>(If yes, attach statement)</i>	
		Have you had a driver's license revoked or suspended for refusing to submit to an alcohol or drug test? <i>(If yes, attach statement)</i>	
		Have you ever been given a Coast Guard letter of warning or been assessed a civil penalty for violation of maritime or environmental regulations? <i>(If yes, attach statement)</i>	
<b>SECTION VII. CERTIFICATION AND OATH - IMPORTANT - READ BEFORE SIGNING</b>			
Whoever, if in any matter within the jurisdiction of any department or agency of the U.S. knowingly and willfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined under this title or imprisoned not more than 5 years, or both (18 USC 1001).			
I CERTIFY that the information on this application is true and correct and that I have not submitted an application of any type to the Officer in Charge, Marine Inspection in any port and been rejected or denied within 12 months of this application.		43. SIGNATURE OF APPLICANT	
44. DATE	45. SIGNATURE OF VERIFYING OFFICIAL (CG USE ONLY)	46. PORT OF (CG USE ONLY)	
<b>OATH FOR LICENSE (To be completed when original license is received)</b>			
I do solemnly swear or affirm that I am a citizen of the United States and that I will faithfully and honestly, according to my best skill and judgement, and without concealment and reservation, perform all the duties required of me by the laws of the United States. I agree to have a thorough physical examination each year if I act as a pilot under authority of the License being issued.			47. DATE
48. SIGNATURE OF LICENSEE		49. SIGNATURE AND TITLE OF WITNESSING OFFICIAL	
<b>OATH FOR MERCHANT MARINER'S DOCUMENT ONLY (To be administered when original MMD is received)</b>			
I HEREBY SWEAR (or affirm) that I will faithfully and honestly perform all duties required of me by law and carry out the lawful orders of my superior officers on shipboard.			50. DATE
51. SIGNATURE OF MARINER		52. SIGNATURE AND TITLE OF WITNESSING OFFICIAL	
<b>SECTION VIII. LICENSE / MMD ISSUED (FOR REC USE ONLY)</b>			
LICENSE / ENDORSEMENTS AND DOCUMENTS RATINGS ISSUED			
<input type="checkbox"/> DUPLICATE DISCHARGES ISSUED TO APPLICANT			
DATE	SIGNATURE OF ISSUING OFFICIAL	PORT OF	
<b>FOR NATIONAL MARITIME CENTER USE ONLY (DUPLICATE TRANSACTIONS)</b>			
NAME OF RECORD (LAST, FIRST MI)		DUPLICATE NO.	SOCIAL SECURITY NUMBER DATE NATURALIZATION
CITIZENSHIP	DATE OF BIRTH	PLACE OF BIRTH	COLLECT ADDITIONAL FEE/OP.
RATINGS / ENDORSEMENTS AUTHORIZED			

# APPLICATION FOR LICENSE AS OFFICER, STAFF OFFICER, OPERATOR, AND MERCHANT MARINER'S DOCUMENT

## SECTION IX. MARINER CONSENTS

NATIONAL DRIVERS REGISTRY - I authorize the National Drivers Registry (NDR), through a designated State Department of Motor Vehicles, to furnish to the U.S. Coast Guard (USCG) information pertaining to my driving record. This consent constitutes authorization for a single access to the information contained in the NDR to verify information provided in this application. I understand the Coast Guard will make the information received from the NDR available to me for review and written comment prior to taking any action against my license, or U.S. Merchant Mariner's Document. Authority: 46 USC 7101(g) and 46 USC 7302(c).

SIGNATURE OF APPLICANT \_\_\_\_\_

DATE \_\_\_\_\_

### MARINERS TRACKING SYSTEM

I consent to voluntary participation in the Mariner's Tracking System to be used by the Maritime Administration (MARAD) in the event of a national emergency or sealift crisis. In such an emergency situation MARAD would disseminate your contact information to an appropriate maritime employment office to determine your availability for possible employment on a sealift vessel. This is not a reserve program nor does it guarantee call-up for employment. This authorization may be revoked at any time by contacting a U.S. Coast Guard regional Examination Center.

SIGNATURE OF APPLICANT \_\_\_\_\_

DATE \_\_\_\_\_

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OM B control number.

## PRIVACY ACT STATEMENT

IN ACCORDANCE WITH 5 USC 552a(e)(3), THE FOLLOWING INFORMATION IS PROVIDED TO YOU WHEN SUPPLYING PERSONAL INFORMATION TO THE U.S. COAST GUARD.

1. AUTHORITY WHICH AUTHORIZED THE SOLICITATION OF INFORMATION.
  - A. 46 USC 7302, 7305, 7314, 7316, 7319 AND 7502
  - B. SEE 46 CFR PARTS 10 AND 12
2. PRINCIPLE PURPOSES FOR WHICH INFORMATION IS INTENDED TO BE USED:
  - A. TO ESTABLISH ELIGIBILITY FOR A MERCHANT MARINER'S DOCUMENT, DUPLICATE DOCUMENTS, OR ADDITIONAL ENDORSEMENTS ISSUED BY THE COAST GUARD.
  - B. TO ESTABLISH AND MAINTAIN A CONTINUOUS RECORD OF THE PERSON'S DOCUMENTATION TRANSACTIONS.
  - C. PART OF THE INFORMATION IS TRANSFERRED TO A FILE MANAGEMENT COMPUTER SYSTEM FOR A PERMANENT RECORD.
3. THE ROUTINE USES WHICH MAYBE MADE OF THE INFORMATION:
  - A. TO MAINTAIN RECORDS REQUIRED BY 46 USC 7319 AND 7502
  - B. TO ENABLE ELIGIBLE PARTIES (*i.e. the seamen heirs or properly designated representative*) TO OBTAIN INFORMATION CONCERNING DOCUMENTATION
  - C. TO PROVIDE INFORMATION TO THE U.S. MARITIME ADMINISTRATION FOR USE IN DEVELOPING MANPOWER STUDIES AND TRAINING BUDGET NEEDS.
  - D. TO DEVELOP INFORMATION AT THE REQUEST OF COMMITTEES OF CONGRESS.
  - E. TO PROJECT BILLET ASSIGNMENTS AT COAST GUARD MARINE INSPECTION/SAFETY OFFICES.
  - F. TO PROVIDE INFORMATION TO LAW ENFORCEMENT AGENCIES FOR CRIMINAL OR CIVIL LAW ENFORCEMENT PURPOSES.
4. WHETHER OR NOT DISCLOSURE OF SUCH INFORMATION IS MANDATORY OR VOLUNTARY (*Required by law or optional*) AND THE EFFECTS ON THE INDIVIDUAL IF ANY OF NOT PROVIDING ALL OR PART OF THE REQUESTED INFORMATION IS VOLUNTARY, DISCLOSURE OF THIS INFORMATION IS VOLUNTARY, BUT FAILURE TO PROVIDE MAY RESULT IN NON-ISSUANCE OF THE REQUESTED DOCUMENT(S).